

### Timber Times Partners for Healthy Forests

AUGUST 2016

### SPECIAL POINTS OF INTEREST

- Heat Safety
- Emergency Care
- First Aid/ CPR
- Artificial Respiration
- Severe Bleeding
- Other Problems
- Helpful Links
- Bad Safety Photos

# Safety Flyer

Hello All,

At the recent CTIA Annual Meeting in May, the board decided to continue the monthly safety flyer. Safety has always been a primary focus for CTIA and it is a critical component to keep our workman comp rates at a reasonable level.

If you have contractors or fellow loggers who are not CTIA members, we would be happy to add them to our list. Our goal is safety industry wide!

If you find an interesting article or an OSHA related issue, please share with me so that I can send to our larger list.

Hope this helps improve your safety program.

Molly

The Colorado Timber Industry Association (CTIA) is an association of small, family-owned businesses committed to logging, processing and performing service work in the forests of Colorado. We are exceptional partners to the public and private stewards of our valuable and beautiful forests. We embrace Best Management Practices (BMPs) and sustainable forestry. To meet these values, we host annual continuing education classes on BMPs and conduct field audits to demonstrate our accountability to high quality, active management designed to promote long term forest health.

## **Heat Exhaustion/ Heat Stroke**

### <u>Causes</u>

High temperatures, humidity, direct exposure to sun, and limited air movement; also physical exertion, poor physical condition, certain medications, and low tolerance for hot workplaces.

### **Symptoms of Heat Exhaustion**

- Headaches, dizziness, lightheadedness, or fainting.
- Weakness and moist skin.
- Mood changes such as irritability or confusion.
- Upset stomach or vomiting.

### Symptoms of Heat Stroke

- Dry, hot skin with no sweating.
- Mental confusion or loss of consciousness.
- Seizures or convulsions.



### **Prevention**

- Know the symptoms and monitor yourself and your co-workers.
- Block direct sunlight and other sources of heat.
- Use cooling fans or air conditioning, and rest regularly.
- Drink lots of water (about one cup every 15 minutes).
- Wear lightweight, light-colored, loose-fitting clothes.
- Avoid alcohol, caffeinated drinks, and heavy meals.

### **Treatment**

- Call 911 (or a local emergency number) immediately.
- Move the worker to a cool, shaded area, and loosen or remove heavy clothing.
- Provide cool drinking water.
- Fan and mist the person with water.

### **Emergency Care**

### **GENERAL CAUTION!**

This section is not a substitute for proper first aid training by the American Red Cross or other agencies. It is only a guide to help you remember the most important steps in administering first aid. Recommendations are derived from current policies of the American Heart Association, American Red Cross, and American Academy of Orthopedic Surgeons.



- 1. First aid is the immediate and temporary care given to the victim of an accident and sudden illness until professional medical help can be obtained.
- 2. First aid kits sufficient for the number of employees shall be provided at all logging sites and in all personnel transport vehicles. First aid kits shall be regularly inspected and replenished as needed. It is everyone's responsibility to be familiar with the contents of these kits and to acquire basic first aid knowledge.
- 3. In the event of an accident or emergency, immediately summon medical assistance and be sure to give complete directions to the accident scene.
- 4. While awaiting medical assistance, follow these procedures: a. Check the victim's breathing. If the victim is not breathing, open the airway by opening the mouth and tilting the head back. If breathing does not resume spontaneously, maintain the open airway and perform mouthto-mouth resuscitation.

b. Check for heartbeat. If the victim does not have a heartbeat, perform cardiopulmonary resuscitation (CPR) if qualified.

c. Check for injuries. Perform emergency first aid as outlined in this section.

- 5. Accident victims must not be moved unless it is essential to protect their lives or to prevent additional injury.
- 6. If the victim is conscious, reassure them. Keep them calm and quiet, and treat for shock while awaiting medical assistance.
- 7. Use personal protection to prevent transmission of blood borne pathogens.

# **First Aid and CPR Training**

- 1. All employees shall be trained in first aid and CPR methods by a qualified instructor.
- 2. The first aid and CPR training shall consist of at least the following: a. Definition of first aid.
  - b. Legal issues of applying first aid (Good Samaritan Laws).
  - c. Basic anatomy.
  - d. Patient assessment.
  - e. First aid for respiratory arrest, cardiac arrest, hemorrhage, lacerations/abrasions, amputations, musculoskeletal injuries, shock, eye injuries, burns, loss of consciousness, extreme temperature exposure (hypothermia/hyperthermia), paralysis, poisoning, loss of mental functioning, and drug overdose.

f. CPR

- g. Application of dressings and slings.
- h. Treatment of strains, sprains, and fractures.
- i. Immobilization of injured persons.
- j. Handling and transporting injured persons.
- k. Treatment of bites, stings, contact with poisonous plants or animals.
- 3. First aid methods prescribed by the American Red Cross, the Mine Safety and Health Administration, or equivalent organizations are suggested to be used for training.
- 4. First aid and CPR training must be documented in writing and training must remain current.





# **Artificial Respiration**

Artificial respiration is the procedure for causing air to flow in and out of the lungs by artificial means when natural breathing stops. Breathing stoppage may be due to accidents such as electric shock, drowning, or asphyxiation, or from internal medical problems. A life may be saved if you act quickly.

- 1. Turn the victim on his side and clear the mouth and throat of all foreign material (chewing gum, food, loose false teeth, etc.).
- 2. Place the victim on his back. Keep the head tilted back by placing fingertips under the bone of the chin and the other on the forehead. Use the fingers of the hand on the forehead to pinch the victim's nose closed.
- 3. Seal your mouth, or breathing shield if one is being used, over the victim's, and blow air into the lungs.
- 4. Ensure that the air you blow into the mouth does not leak out of the nose (keep the nose pinched shut) or leak from around the mouth (form a tight seal with your lips). The victim's chest must rise when you blow.
- 5. Blow vigorously into an adult's mouth (gently into a child's mouth) until you see the chest rise, then remove your mouth and allow the victim to exhale.
- 6. Repeat inhalations every four to five seconds for adults (every three seconds for children). Continue artificial respiration until the victim revives or until qualified medical personnel take over.



### **Severe Bleeding**

Bleeding from open wounds can usually be stopped by direct pressure. Disposable rubber gloves should be worn when treating bleeding wounds.

- 1. Use a sterile compress of cloth if available. Otherwise, use a clean handkerchief, towel, or cloth.
- 2. Place the compress over the wound and press directly on the compress with your hand.
- 3. If the compress soaks through, place additional compresses over the wound and continue direct pressure. Do not remove compresses once applied.
- 4. Elevate the injured part as high as possible over the victim's body to reduce blood flow and allow the blood to clot.
- 5. Treat the victim for shock.
- 6. If these efforts fail to stop the bleeding, apply firm pressure to the nearest recognized pressure point until bleeding stops. If all of these measure fail to stop bleeding on an arm or leg, a tourniquet may be considered. The decision to apply a tourniquet is a decision to risk the sacrifice of the limb in order to save a life. Once the tourniquet is applied, do not loosen or remove it. Write the time and location that the tourniquet was applied on a note attached to the victim and have them transferred as quickly as possible to a medical facility.



### **Other Problems**

#### **1. HEART ATTACK**

<u>Symptoms:</u>

Persistent chest pain, shortness of breath, pale color, weak feeling, shock. *Treatment:* 

Keep the person calm and quiet. Do not allow the person to walk. Loosen tight clothing and make the person comfortable. Help him take prescribed medication when available. Obtain medical assistance.

### 2. STROKE

<u>Symptoms:</u>

Paralysis or weakness of one side of the body. Difficulty breathing, talking or swallowing.

<u>Treatment:</u>

Keep the victim's mouth and throat clear. Keep the victim calm and quiet. Obtain medical assistance.

### **3. HEAT STRESS DISORDERS**

It is vital that you not only understand heat stress and how it affects you but, more importantly, what steps you can take to avoid it. Heat stress occurs when the humidity, air temperature, radiant heat, and too little air movement combine with heavy physical work and clothing to dehydrate the body and raise the body temperature beyond safe limits. Perspiration, as it evaporates, is the body's main defense against heat. By vaporating, perspiration cools the body. In high humidity sweating becomes profuse but does not evaporate, so no heat is lost. When body fluids lost through sweating are not replaced, the body's heat controls break down and subject the body to heat stress.

#### a. HEAT CRAMP

These painful muscle cramps are caused by the imbalance of salt and other minerals in body fluids. Drinking lightly salted water, tomato juice, or commercial "athletic" drinks in moderation will help maintain a proper balance of salt and other minerals.

### **b. DEHYDRATION EXHAUSTION**

This form of heat disorder may occur after several continuous days of work in the heat. If daily water losses are not replaced, progressive dehydration can severely reduce work capacity. Body weight loss is a key indicator of progressive dehydration. A loss of 2% or more is often accompanied by diminished work output. Exhaustion and collapse may follow weight loss exceeding 5%. Treatment includes fluid replacement and rest.

### c. HEAT STRESS PREVENTION

It is not enough to know how to recognize and treat heat disorders. You must know how to prevent them. The two important keys to preventing heat stress are physical fitness and acclimatization.

#### <u>Fitness:</u>

Maintaining a high level of physical fitness is one of the best ways to protect yourself against heart stress. Workers who are physically fit adjust or acclimate to work in the heat almost twice as fast as others. Workers in poor physical condition who are also overweight are even more unsuited for work in the heat. Their greater weight produces more heat without a proportionate increase in surface area for cooling.

#### Acclimatization:

A person acclimated to work in heat runs less risk of heat stress. The body adjusts to hot working conditions in four to eight days by:

- 1. Increasing sweat production.
- 2. Improving blood distribution.
- 3. Decreasing skin and body temperature.
- 4. Decreasing heart rate.

Always adjust to hot weather activity gradually. Set a reasonable pace, take frequent breaks, replace fluids, and do not expect full production until the body acclimates. Specific steps to prevent heat stress are:

- 1. Replace fluids: Drink a lot of fluids to prevent dehydration:
  - a. Drink 1 or 2 cups of juice or water before beginning work.
  - b. Drink fluids frequently during each hour of work.
  - c. Drink as much as you can at lunch and at the evening meal.
  - d. Continue replacing fluids throughout the evening.
- 2. Replace salt: Replace salt lost through sweating. Fit, acclimated workers should be able to accomplish this with normal salt intake at meals, but do not overdo it. Too much salt impairs temperature regulation, and heat disorders become more likely. Avoid salt tablets.
- 3. Replace potassium: Potassium can become depleted over extended periods of work in the heat. Make potassium-rich foods such as bananas and citrus fruits a part of your daily diet. Drink lemonade or tomato juice to replace lost fluids. Commercial "athletic" drinks also help make up potassium losses.
- 4. Establish good work habits: There are individual differences in heat tolerance. Know your own limits and work to them.
- 5. Take rest periods: Work-rest cycles must be adjusted to prevent progressive fatigue. Rest frequently in cool, shaded areas to minimize heat buildup and progressive fatigue.

# **Helpful Links**

http://www.redcross.org/news/article/Red-Cross-How-to-Stay-Safe-in-Hot-Weather

http://loggingsafety.com/content/xi-emergency-care

http://www.redcross.org/take-a-class/cpr

http://s7d2.scene7.com/is/content/Caterpillar/C10810166







